Memo

From: Staff

Re: RDOCS Bill Issues and Policy

Date: September 11, 2012

Why we need RDOCS:

- **The Primary Care Shortage:** Even with existing programs, we face a dire shortage of primary-care physicians in the near future (45,000 by 2020).
- **Shortage of Funding:** There are only enough health-education scholarships under current programs for 1 out of every 10 applicants.
- Gap in current law: There currently exists a:
 - Federal scholarship program (Nat'l Health Service Corps);
 - o Federal loan repayment program (Nat'l Health Service Corps);
 - Federally financed state loan-repayment program for medical professionals;
 - o But no parallel federally financed state scholarship program.

How RDOCS differs from National Health Service Corps:

- RDOCs has a Local Focus: RDOCS will be operated by the states with 90 percent federal financing (NHSC is operated entirely by the feds). RDOCS scholars will attend state-run medical schools in their state of residence (or if their home state has no medical school, in a neighboring state); RDOCS graduates ("officers") must perform service in their state of residence.
- RDOCS focuses on the physician shortage: RDOCS provides scholarships for primary care medical students only, not allied health professions.
- RDOCs prioritizes accelerated primary care programs: RDOCs scholarships are prioritized for students in 6-year accelerated family-medicine programs, and prioritizes programs that include clinical training in underserved communities even more.
- RDOCs focuses on Service: Commitment is 5 years under RDOCS (the Nat'l Health Service Corps only requires 2-4 depending on the profession).
- RDOCs is funded to address the primary care shortage over 10 years.